

Office of Administration
Commissioner's Office
 Contract Period July 1, 2015 – June 30, 2016
"Request for Preauthorization for Other Services"

Program: **Alternatives to Abortion**

Contractor: Alliance for Life – Missouri, Inc.

Subcontractor: Bethany Christian Services of Missouri

Please enter below the information for each item/service to be purchased. List the date of purchase, item to be purchased, cost for the item, and the justification. Items must be approved before purchased/provided to be reimbursed.

Client Name [REDACTED] Date Enrolled Transferred to Bethany caseload in March 2017, signed up with Lutheran in October 2016

Proposed Purchase Date	Item	Total Cost (include formal estimate from provider of services)	Justification, include other sources of funding that have been attempted
April 1, 2017	April Car Payment	\$247.79 (see attached for sample)	Client has requested the payment of her April car note. She was working full time supporting herself and her children but has recently been put on bedrest meaning little to no income until baby arrives and she is able to go back to work.
Amt to be reimbursed		\$247.79	

Authorized person requesting purchase: Aimee Travers Date: March 22, 2017

Alliance for Life Program Manager: Carrie Hoelscher

Approved for purchase: Emily Kraft Date 3/22/17

Purchase denied: Ø Date _____

Reason for denying purchase: _____

- 1) Initial Client Risk Assessment - Within twenty-four (24) hours of the client's admission to the program, the subcontractor's credentialed case manager must complete an assessment, including a screening for domestic abuse, in order to document the factors and the services needed to minimize the risk of abortion and to complete the pregnancy.
 - 2) Post-Partum Depression Screenings - Six (6) to eight (8) weeks post-partum, the subcontractor must have one of the subcontractor's credentialed case managers conduct an assessment for post-partum depression using the Edinburgh Postnatal Depression Screening Scale (EPDS) (Attachment 3).
- Eligibility must be determined upon entry into the program and

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Los Angeles, CA 90076-0809



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We purchased your motor vehicle contract from GRATEFUL MOTORS LLC and will be servicing your account. Your account number is [REDACTED]. Please make sure that you always write this account number on any payments or correspondence you send to us.

Your first payment of \$247.79 is due on 04/09/2017. We will send you a billing statement at least two weeks before the due date. If you do not receive a billing statement before the payment is due, please call us at (888) 739-9192. The payment mailing address is:

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It is possible that the address stated on your credit application did not match the address stated on your consumer credit report. We are writing you to confirm the validity of your contract. If you did not sign the contract, please call our office immediately at (888) 739-9192.

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AQA
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April
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April 9th